

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Hawaii Democratic Party

ADDRESS (number and street)

404 Ward Ave. Ste 200

☐ Check if different than previously reported. (ACC)

Honolulu

HI

96814

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00212787

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☒ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Florence L Kong Kee

Signature of Treasurer

Florence L Kong Kee

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Hawaii Democratic Party

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 03 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y
 03 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		64317.94
(b) Cash on Hand at Beginning of Reporting Period.....	55163.15	
(c) Total Receipts (from Line 19)	3118.80	20568.39
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	58281.95	84886.33
7. Total Disbursements (from Line 31)	2231.54	28835.92
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	56050.41	56050.41
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	36513.84	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Hawaii Democratic Party

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
03 / 01 / 2015

To:

M M / D D / Y Y Y Y Y
03 / 31 / 2015
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

0.00

(ii) Unitemized

118.61

324.26

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

118.61

324.26

(b) Political Party Committees

0.00

7052.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

118.61

7376.26

12. Transfers From Affiliated/Other

Party Committees.....

3000.00

6000.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.19

1375.65

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

5816.48

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

5816.48

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

3118.80

20568.39

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

3118.80

14751.91

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	245.03	5171.77
(ii) Non-Federal Share.....	435.60	9840.02
(b) Other Federal Operating Expenditures	1550.91	13824.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2231.54	28835.92
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2231.54	28835.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1795.94	18995.90

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	118.61	7376.26
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	118.61	7376.26
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	1795.94	18995.90
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	1795.94	18995.90

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A-N5HCB
.

Form/Schedule: F3XN
Transaction ID :

Please note that employees of the Committee that spent less than 25% of their time on Federal Election Activity were paid on the Schedule H4 uniform split; this includes benefits. - All fundraising activity were for the purpose of fundraising for the benefit of the Committee and was not attributable to any candidate for federal office.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 11

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Hawaii Democratic Party

Full Name (Last, First, Middle Initial)

A. Democratic National Committee

Mailing Address 430 S Capitol St SE

City
Washington

State Zip Code
DC 20003-4024

FEC ID number of contributing
federal political committee.

C C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13052.00

Date of Receipt

03 / **23** / **2015**

Transaction ID : C10282521

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3000.00

3000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 11

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Hawaii Democratic Party

Full Name (Last, First, Middle Initial)

A. ADP, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		06		2015

Mailing Address 711 Kapiolani Blvd

City	State	Zip Code
Honolulu	HI	96813-5237

Transaction ID : D578061Purpose of Disbursement
Payroll Fee

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

50.91

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. IRS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2015

Mailing Address

City	State	Zip Code

Transaction ID : D578053Purpose of Disbursement
Taxes

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

305.75

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Alex Wheeler

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2015

Mailing Address 1418 Liholiho St

City	State	Zip Code
Honolulu	HI	96822-4149

Transaction ID : D578060Purpose of Disbursement
Employee Pay

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1100.25

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►

1456.91

TOTAL This Period (last page this line number only)..... ►

1456.91

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 9 OF 11

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : L828

Hawaii Democratic Party

LOAN SOURCE Full Name (Last, First, Middle Initial)

Democratic National Committee

Election:

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address 430 S Capitol St SE

City Washington

State DC

ZIP Code 20003-4024

Original Amount of Loan

30000.00

Cumulative Payment To Date

14000.00

Balance Outstanding at Close of This Period

16000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
10 / 20 / 2011

Date Due

M M / D D / Y Y Y Y
04 / 15 / 2013

Interest Rate

0.00 % (apr)

Secured:

☒ Yes ☐ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

16000.00

TOTALS This Period (last page in this line only)..... ►

16000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 10 OF 11

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Hawaii Democratic Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Abercrombie For Governor

Nature of Debt (Purpose):
Rent and UtilitiesMailing Address 1050 Ala Moana Blvd
Ste 2150City State Zip Code
Honolulu HI 96814-4931

Outstanding Balance Beginning This Period

14787.42

Transaction ID : D511062

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

14787.42

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Department of the Treasury - IRS

Nature of Debt (Purpose):
Federal Taxes

Mailing Address PO Box 105083

City State Zip Code
Atlanta GA 30348-5083

Outstanding Balance Beginning This Period

5726.42

Transaction ID : D527886

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5726.42

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

20513.84

2) TOTALS This Period (last page this line number only)..... ►

20513.84

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

16000.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

36513.84

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 11 OF 11

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Hawaii Democratic Party

A. Full Name (Last, First, Middle Initial) Victoria Ward Limited		Transaction ID : D578064		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 31000 1240 Ala Moana Blvd					
City Honolulu	State HI	Zip Code 96849-0001			
Purpose of Disbursement: Rent				Allocated Activity or Event Year-To-Date 15011.79	
Activity or Event Identifier: Administrative		Category/Type		Date MM / DD / YYYY 03 / 04 / 2015	
FEDERAL SHARE		+		NONFEDERAL SHARE	
245.03				435.60	
		=		TOTAL AMOUNT	
				680.63	

B. Full Name (Last, First, Middle Initial)		Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement:			
Activity or Event Identifier:		Category/Type	
FEDERAL SHARE		+	
		NONFEDERAL SHARE	
		=	
		TOTAL AMOUNT	

C. Full Name (Last, First, Middle Initial)		Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement:			
Activity or Event Identifier:		Category/Type	
FEDERAL SHARE		+	
		NONFEDERAL SHARE	
		=	
		TOTAL AMOUNT	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
245.03		435.60		680.63

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
245.03		435.60		680.63